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APPLICANTS

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** CONTINUING DATA ***** *✓*

This appln claims benefit of 60/444,196 02/03/2003

** FOREIGN APPLICATIONS ***** *✓*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/02/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>SM</i> Examiner's Signature <i>✓</i>	NJ	10	20	6

ADDRESS

022468
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TITLE

Poll scheduling for emergency calls

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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